

PLEASE READ COVER SHEET ENTIRELY

Application for Organization/Agency

Hart EMC Foundation, Inc.

Organization Name _____



What is Operation Round Up?

Operation Round Up is a nationally-recognized program funded by Hart EMC members. Participating members voluntarily have their monthly electric bill rounded up to the next dollar amount, contributing an average of \$6 annually. For more information visit www.hartemc.com/ or email angie.brown@hartemc.com

Who is eligible for funding?

To be eligible you must conduct business in at least one of the 6 counties that Hart EMC serves: Banks, Elbert, Franklin, Hart, Madison, Stephens.

How can an organization/agency apply for funding?

Applications may be obtained by mail, website, or at one of our local offices and are accepted by mail or by dropping off at one of our local offices. Grants for organizations are limited to a maximum of one grant up to \$10,000 in a 12-month period.

What is the selection process?

Funds are administered by volunteer members of the Hart EMC Foundation Board. The decisions made by the board are based on the funds available and the community impact of requests being considered. All applicants will be notified within 30 days of the board's decision.

This is a list of items which **do not qualify** for funding:

- Churches & religious organizations (except for church affiliated programs when there is a direct community impact involved)
- Schools & preschools
- Lobbying, political organizations, or campaigns
- For-profit organizations

Submit Applications to:

Hart EMC Foundation, Inc.
Attn: Angie Brown
P. O. Box 250
Hartwell, Georgia 30643

Phone: 706-377-2223 or 800-241-4109

Application Checklist

Please check the following boxes if you have included the items with your application.

- Mission Statement of organization
- Goals and objectives of organization
- Purpose for requested funding
- Specific breakdown of expenses for requested funding
- Description of how effectiveness will be evaluated
- Statistics by county of individuals served and/or community impact
- Current operating budget for organization
- Previous year Balance Sheet and Income/Expense statement
- List of Board Members
- Front page of IRS 501 (c) 3 letter
- Three letters of support from listed references

Organization must submit eight (8) copies of the complete application to Hart EMC Foundation, Inc. Incomplete applications will automatically be denied

Application for Organization/Agency

Organization Information

Date of Application: _____ Tax ID: _____

Legal Name of Organization: _____

Address (physical & mailing): _____
Street and/or P.O. Box

City State Zip Code County

Contact Person: _____ Title: _____

Phone: _____ Direct Phone: _____

Fax: _____ Website: _____

Email: _____

Which of the following counties does your organization serve: (Check all that apply)

Banks Elbert Franklin Hart

Madison Stephens

Please list any additional counties you may serve: _____

Request

Amount of Request: _____

Reason for request: _____

List other funding sources for this request. Include name, amounts & whether approved, committed, pending, etc.

Source #1 _____	Amount _____	Status _____
Source #2 _____	Amount _____	Status _____
Source #3 _____	Amount _____	Status _____

Please provide the following information:

- Mission Statement of organization
- Goals and Objectives of organization
- Describe the purpose/program for which the funds are requested (maximum 1 page)
- Itemization of projected expenses for requested funds
- Description of how organization will evaluate the effectiveness of proposal
- Statistics (by counties served in Hart EMC area) of individuals effected by your organization

The following **MUST** be sent in with your application:

- Current operation budget for organization
- Previous year Balance Sheet and Income/Expense Statement
- List of Board of directors
- Front page of IRS letter approving 501 (c) 3 status
- Three letters of support from persons familiar with your organization (not a board member)

References

Please list three references that are familiar with your organization. It is strongly suggested the references come from within Hart EMC service area.

Name: _____ Phone: _____

Address: _____

Name: _____ Phone: _____

Address: _____

Name: _____ Phone: _____

Address: _____

Grant Info

Have you ever received a grant from the Hart EMC Foundation? Yes ___ No ___

If yes, date of Grant: _____ Amount of Grant: _____
 (Attach copy of grantee report previously submitted.)

Limitations

Because of budget limitations and foundation bylaws, Hart EMC Foundation, Inc. will not consider the following:

- Payment of electric or gas bills
- Lobbying, political organizations or campaigns
- Fund-raising dinners, raffles and other events
- General fund-raising
- Advertising
- General operating expenses

The information contained in this application is for the purpose of obtaining funding from the Hart EMC Foundation, Inc., on behalf of the undersigned represents and warrants that the information provided is true and complete and that the Hart EMC Foundation, Inc., may consider this statement as continuing to be true and correct until a written notice of a change is provided. The Hart EMC Foundation, Inc. is authorized to make all inquiries it deems necessary to verify accuracy of the statements made herein. The Hart EMC Foundation Board of Directors makes donations from funds collected through the Hart EMC Foundation Operation Round Up Program. These funds are voluntary contributions from participating Hart EMC members.

Date: _____ Name of Organization: _____

Name of Representative: _____

Signature of Representative: _____